

RCE
JW

HAVERSTOCK & OWENS LLP
162 North Wolfe Road
Sunnyvale, California 94086
(408) 530-9700
Customer No.: 28960

In re Application of:
Serial No.:
Filed:
Entitled:
Group Art Unit:
Examiner Name:

James L. Hobart et al.
10/669,294
September 23, 2003
LASER TREATMENT AND METHOD FOR TREATMENT OF BIOLOGICAL TISSUES
3739
Peffley, Michael F.

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Sir:

This is a Request for a Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

CERTIFICATION UNDER 37 CFR § 1.08

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop RCE, February 10, 2006.

Nicole Walsh
(Name of Person Mailing Paper)

Signature

1. **Submission required under C.F.R. § 1.114**

a. X Previously submitted

i. X Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on January 10, 2006.
(Any unentered amendment(s) referred to above will be entered)

ii. _____ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.

iii. _____ Other _____.

b. _____ Enclosed

i. _____ Amendment/Reply 02/14/2006 SFELEKE1 00000063 10669294
ii. _____ Affidavit(s)/Declaration(s) 01 FC:2801 395.00 OP
iii. _____ Information Disclosure Statement (IDS)
iv. _____ Other _____

2. **Miscellaneous**

a. _____ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
(Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)

b. _____ Other _____.

3. c. _____ Applicant is entitled to small entity status

4. **Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37C.F.R. § 1.114 when the RCE is filed.

a. X The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No.: 08-1275.

i. X RCE fee required under 37 C.F.R. § 1.17(e)

ii. _____ Extension of time fee (37 C.F. R. § 1.136 and 1.17)

iii. _____ Other _____

b. X Check in the amount of \$395.00 enclosed

c. _____ Payment by credit card (form PTO-2038 enclosed)

5. X Return Receipt Postcard

Dated: February 10, 2006

By: _____
Name: Jonathan O. Owens
Registration No. 37,902